FORM CWM #61 Page 1

NATIONAL ORGANIZATION SONS OF UNION VETERANS OF THE CIVIL WAR CIVIL WAR MEMORIAL ASSESSMENT FORM

Type of Memo	rial (check all	l applicable)		
			with Cannon	standalone Cannon
				nined glass windows, etc.)
Affiliation				
GAR	MOLLUS	SUVCW	WRC	ASUVCW
LGAR	DUVCW	SUVCWOther		_
If known, record name a	and number of post, ca	amp, corps, auxiliary, tent, circ	cle or appropriate infor	mation of other groups:
Original Dedicatio that would have informa with full identification of	ition on the <i>first</i> dedica	ation ceremony and/or other f	onsult any/all newspar acts on the memorial.	per archives for a local paper's article Please submit a copy of your findings
Location				
The Memorial is c	<i>currently</i> located	at:		
Street/Road addre	•			
			ordinates N37.30484	W89.51759
City/Village &/or T	ownship Cape Gira			
County Cape Girardea			souri	Zip Code 63073
The front of the M	emorial faces: _	North South _	<u>′_</u> East Wes	t
Government Boo Name City of Cape Gira		ndividual Owner		
Dept./Div. Parks and	Recreation			
Street Address 41	0 Kiwanas Drive			
City Cape Girardeau		State Miss	ouri	Zip Code 63701
Contact Person _		Telephor	e (⁵⁷³) <u>339.6300</u>	Zip Code 63701 ext
Is Memorial on the	e National Regis	ter of Historic Places _	Yes <u></u> ✓ No l	ID # if known
	t or base under a So	ulpture: culpture or Cannon = granite, marble, etc.) <u>Lami</u>		<u>✓</u> Metal <u>✓</u> Other
Material of the Sculpt If known, name speci	ureStone fic material (color of	Concrete Metal granite, marble, etc.)	Other Is it ho	ollow or solid?

FORM CWM #61 Page 2 For Historic Marker or Plaque: Material of Plaque or Historical Marker / Tablet = Laminate supported by metal stand For Cannons with/without monument: Material of Cannon = _____ Bronze _____Iron Type of Cannon (if known)_____ Rifled YES Markings: Muzzle______ Base Ring/Breech_____ Left Trunion Right Trunion Is inert ammunition a part of the Memorial? [For camp/department monuments officer's use: Cannon on list of known ordnance] For Other Memorials: (flag pole, G.A.R. buildings, stained glass windows, etc.) What best describes the memorial Materials of the Memorial Complete for All Memorials Approximate Dimensions (indicate unit of measure) - taken from tallest / widest points Height 18 in Width ^{24 in} ____Depth or _____Diameter 3.5 ft (approx.) For Memorials with multiple Sculptures, please record this information on a separate sheet of paper for each statue (service, pose, etc) and attach to this form. Please describe the "pose" of each statue and any weapons/implements involved (in case your photos become separated from this form). Thank you! Markings/Inscriptions (on stone-work / metal-work of monument, base, sculpture) Maker or Fabricator mark / name? If so, give name & location found Please attach legible photographs of all text &/or Record the text in the space below. Please use the addendum – narrative sheet if necessary.

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Environmental Se (The general vicinity and	tting immediate locale surroundir	ng a memorial can play a n	najor role in its overall condi	ition.)
Type of Location				
	<u>✓</u> Park	Plaza/Courtyard	"Town Square"	Post Office
Cemetery School Traffic Circle	Municipal Building	State Capitol		College Campus
Traffic Circle	Library	Other:		
General Vicinity Rural (low populat	ion, open land) <u> </u>	ıburban (residential, nea	ar city) <u>~</u> Town Uı	rban / Metropolitan
Industrial C	e (check as many as may ommercial <u>v</u> St he elements (canopy or e	reet/Roadside within 20		
Any other significant el	nvironmental factor Along	g the Mississippi River and	would be underwater if the	river did does not hold.
	ail the condition of a mon	ument used the addenc	lum form for <i>Monument's</i>	Condition]
Please label each accolisted on this questionr Addendums attached t	site survey, any additiona ount with its source (authonaire, plus any previous contous of this electronic file are the contous if you are requesting	or, title, publisher, date, onservation treatments ne Monument's Condition	pages). Topics include a - or efforts to raise mone on and the <i>Narrative</i> forr	ny reference to the points y for treatment. ns. Only the <i>Monument</i> '
Thank you.				
Inspector Identifica		of On-site Survey 28	March A. D. 2020	
Your Name Sumner G				
Address 2030 San Ped	ro Drive	Ctoto MO	7:n Cada 62010	
City Arnold	34 3856	State MO E-Mai HildifonsTook	Zip Code 63010	
Telephone (636) 46	4-3030	E-IVIAII MIGHORISTOOK	@prodigy.net	
•	of the Allied Orders of souri, Gen. Thomas C. Fletche		o, which one?	
Please send this co	-	Malt Rusch DDC C	hair	
		Walt Busch, PDC, C 1240 Konert Valley		
		•		
		Fenton, MO 6302 (314) 630-8407	U	
	,	رام اون (۱۵۱۵) webusch@hotmail.c	om	
	,	พอมนอบาเผาเบแทลแ.บ	OHI	

Thank you for your help, and attention to detail.

Sons of Union Veterans of the Civil War - Civil War Memorials Committee.

FORM CWM #61 ADDENDUM 1

SONS OF UNION VETERANS OF THE CIVIL WAR CIVIL WAR MEMORIAL ASSESSMENT FORM ADDENDUM – MONUMENT'S CONDITION

Completion of this form is required when requesting grant money using form CWM-62 SUVCW Memorial Grant Application Form and Instructions.

Condition Information

Structural Condition (check as many as may apply)

The following section applies to <u>Monuments with Sculpture</u>, and <u>Monuments without Sculpture</u> including the base for <u>Monuments with Cannon</u>. Instability in the sculpture and its base can be detected by a number of factors. Indicators may be obvious or subtle. Visually examine the sculpture and its base.

	Sculpture	Base
If hollow, is the internal support unstable/exposed?		
(Look for signs of exterior rust)		
Any evidence of structural instability? (Look for cracked joints, missing mortar or caulking or plant growth)	·	
Any broken or missing parts?		
(Look for elements (i.e., sword, musket, hands, arms, etc missing		
due to vandalism, fluctuating weather conditions, etc.)		
Any cracks, splits, breaks or holes?		
(Also look for signs of uneven stress & weakness in the material)		
Surface Appearance (check as many as may apply)		
	Sculpture	Base
Black crusting		
White crusting		
Etched, pitted, or otherwise corroded (on metal)		
Metallic staining (run-off from copper, iron, etc.)		
Organic growth (moss, algae, lichen or vines)	·	
Chalky or powdery stone		
Granular eroding of stone		
Spalling of stone (surface splitting off)		
Droppings (bird, animal, insect remains)	<u> </u>	<u> </u>
Other (e.g., spray paint graffiti) - Please describe		
Does water collect in recessed areas of the Memorial?YesNo	Unable to tell	
Surface Coating		
Does there appear to be a coating?Yes NoUnable to deter	mine	
If known, identify type of coating.		
Gilded Painted Varnished Waxed Unable to Is the coating in good condition? Yes No Unable to determine	determine	
is the coating in good condition?Yes No Unable to determine		
Basic Surface Condition Assessment (check one)		
In your opinion, what is the general appearance or condition of the Memorial? Well maintained Would benefit from treatment In urgent need	of treatment Ur	nable to determine
Briefly describe the Memorial (affiliation / overall condition & any concern not al		
Inspector's Name Date		

SONS OF UNION VETERANS OF THE CIVIL WAR CIVIL WAR MEMORIAL ASSESSMENT FORM ADDENDUM – NARRATIVE

[Generally used to record the text of monuments, but may be used for any other useful information, such as if the monument has been moved or if you have information about the day of dedication. May repeat use of page as often as necessary.]

Street/Road address or site location Water Street GPS Coordinates N37.30484 W89.51759					
City/Village and/or Township Cape Girardeau					
County Cape Girardeau	State_Missouri	Zip Code 63073			
TVT					
EXT Three Sections on placard:					
Trillee Sections on placard.					



